HOUSE BILL REPORT HB 1424

As Reported by House Committee On:

Education

Title: An act relating to medicinal and catheterization administration in public schools.

Brief Description: Permitting school district employees to file medical letters of refusal.

Sponsors: Representatives Quall, Talcott, Haigh, Cody, Rockefeller, Keiser, Morris, Kenney, Lovick, Conway, Veloria, O'Brien, Edwards, Linville, Miloscia, Dunshee, Lantz, Edmonds, Schindler, Roach, Bush and Santos.

Brief History:

Committee Activity:

Education: 2/14/01, 2/22/01 [DP].

Brief Summary of Bill

- School districts and private schools must obtain written agreements from employees before requiring the employees to administer oral medications to students.
- Public school employees who do not have nursing training may refuse to administer oral medications or bladder catheterizations to students if student safety is involved. The employees cannot be dismissed or terminated, but their hours may be reduced if their employer needs to hire additional personnel to perform those services.

HOUSE COMMITTEE ON EDUCATION

Majority Report: Do pass. Signed by 10 members: Representatives Quall, Democratic Co-Chair; Anderson, Republican Vice Chair; Haigh, Democratic Vice Chair; Ericksen, McDermott, Pearson, Rockefeller, Santos, Schindler and D. Schmidt.

Minority Report: Without recommendation. Signed by 1 member: Representative Schual-Berke.

Staff: Susan Morrissey (786-7111).

Background:

Federal and state laws require the state to assure that appropriate special education and related services are provided to children with disabilities. In <u>Irving Independent School District v. Tatro</u>, the United States Supreme Court held that clean intermittent catheterization is both a related and supportive service under the federal Education of the Handicapped Act. Any school that receives funds under the act is required to provide this service if the procedure is necessary for a student to benefit from the student's educational program.

State law requires school districts and private schools to adopt policies on the administration of oral medication or the provision of bladder catheterization if schools provide this service for students during school hours. The policies must address, among other things, which employees may administer the medications or the catheterization, and how schools acquire parent and physician requests to medicate or catheterize. Non-licensed school employees who provide oral medication or catheterization for students must receive training from a physician or registered nurse.

Oral Medication

Before school personnel administer oral medication, certain procedures must be followed. The school must obtain the following: a written request from a parent or legal guardian, a written explanation from a licensed physician or dentist on why the medication needs to be administered during school hours, and directions from the dentist or doctor for administering the medicine. The public or private school employee who administers the medication has to follow the prescription, and ensure that the medication appears to be in its original container and is properly labeled. A registered nurse or advanced registered nurse practitioner must train any public or private school employee who administers oral medication in proper medication procedures.

The 2000 supplemental budget included \$297,000 to train school employees in the administration of oral medication.

Catheterization

Public and private schools may require employees to provide clean, intermittent bladder catheterization of students or help students in performing a self-catheterization. If a school district or private school provides catheterization services, then the school must comply with rules adopted by the Washington State Nursing Care Quality Assurance Commission. The rules require the school to obtain a written request for the catheterization from the parents or guardian and the student's physician and written instructions from a registered nurse or advanced registered nurse practitioner. The instructions must designate the person to provide the catheterization and indicate any necessary supervision. Finally, training is required of any employee who performs

catheterization or assists a student in self-catheterization, if the employee is not a licensed practical nurse. The training must be provided by a physician, advanced registered nurse practitioner, or registered nurse. The school must develop the catheterization policy in accordance with collective bargaining agreements.

Summary of Bill:

School districts and private schools must obtain written agreements from employees before requiring the employees to administer oral medication to students. The schools must maintain a record of the agreements.

With some exceptions, if student safety is involved, public school employees who do not have nursing training may file a written letter of refusal to administer oral medications to students or to perform clean intermittent bladder catheterizations for students. The letter of refusal may not constitute grounds for employee dismissal or the termination of employment. However, it may result in a reduction of the employees' work hours if the school district, as a result of the refusal, must hire additional personnel to administer the medications or the catheterization procedures.

These provisions do not apply to registered nurses, practical nurses, registered nurse practitioners, nurse practitioners, or nursing assistants.

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Appropriation: None.

Fiscal Note: Requested on January 30, 2001.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: Washington's public schools are enrolling more medically fragile children than was once true. At times, untrained or minimally trained school secretaries and paraeducators are being asked to provide medical services to these fragile children. These school employees do not have the right to refuse to perform functions that only doctors and nurses are allowed to perform in hospitals. School employees want to do their best for students but are terrified of giving children the wrong medication or dose of insulin, a mistake that could have tragic consequences for their young charges. This legislation allows those employees the right to keep their jobs if they refuse to perform these nursing chores out of concern for student safety. School administrators could still resort to other disciplinary actions if an employee exercised this right. This bill simply tries to provide some protection for vulnerable school employees at the bottom of the ladder; these individuals should not be forced to perform medical tasks that could jeopardize student safety. Our school system's heavy reliance on unlicenced, minimally trained and supervised secretaries and paraeducators to deliver health services is

detrimental to the students who receive the services and to the employees who deliver them.

Testimony Against: The right of refusal proposed in this legislation will cause a financial hardship to school districts. Although the situation is not ideal, the Legislature has funded training for individuals who administer oral medications and provide other medically related services. All segments of the education community care about the health and safety of children, but there is some disagreement about this issue. School directors will continue to work with their employees and the Legislature to look for ways to provide appropriate care to students and to solve this issue.

Testified: (In support) Kara Wilson, Puyallup School District; Sandy Iverson, Puyallup School District; Carol Harrington, Public School District; and Doug Nelson, Public Employees Association.

(Opposed) Ken Kanikeberg, Office of the Superintendent of Public Instruction; and Dan Steele, Washington State School Directors' Association.

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